

STATEMENT OF ORGANIZATION
for a
PERSONAL CAMPAIGN COMMITTEE
(Utah Code Section 20A-11-202)

CANDIDATE INFORMATION

Name	Office	District Number
Street Address	City	State Zip Code Phone Number

PERSONAL CAMPAIGN COMMITTEE SECRETARY

Name of Secretary	Phone Number
Street Address	City State Zip Code

PERSONAL CAMPAIGN COMMITTEE MEMBERS

Attach additional pages if necessary

Name of Committee Member	Phone Number
Street Address	City State Zip Code

Name of Committee Member	Phone Number
Street Address	City State Zip Code

I, _____
(Name of Candidate)

affirm that the member(s) listed above have been selected
to be my personal campaign committee.

Signature of Candidate

Date

To File this Form

Mail or deliver to
Office of the Lieutenant Governor
Utah State Capitol Complex
East Office Building, Suite E325
Salt Lake City, UT 84114-2325
Fax (801) 538-1133

For More Information

Contact the Office of the Lieutenant Governor
(801) 538-1041
1-800-995-VOTE (8683)
elections@utah.gov

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Date Received